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TO:	FROM:	
Examiner Con P. TRAN	Bradley Wright	
COMPANY:	DATE:	
U.S. Patent and Trademark Office	November 3, 2005	
FAX NO.:	TOTAL NO. OF PAGES: (including cover sheet)	
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YOUR REFERENCE NO.:	OUR REFERENCE NO.:	
09/576,039	006918.00011	
RE:		
Application Data Sheet		
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COMMENTS:

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**CHICAGO** 

WASHINGTON, D.C.

**BOSTON** 

PORTLAND, OR

# **Application Data Sheet**

#### **Application Information**

Application number::

09/576,039

Filing Date::

05/23/00

Application Type::

Regular

Subject Matter::

Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?::

None

Number of CD disks::

Number of copies of CDs::

Sequence submission?::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title::

**AUDIO APPARATUS** 

Attorney Docket Number::

006918.00011

Request for Early Publication?::

NO

Request for Non-Publication?::

NO

Suggested Drawing Figure::

Total Drawing Sheets::

4

Small Entity?::

NO

Latin name::

Variety denomination name::

Petition included?::

NO

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?::

NO

### **Applicant Information**

Inventor Applicant Authority Type::

Primary Citizenship Country:: United Kingdom

Status:: **Full Capacity** 

Given Name:: Andrew

Middle Name::

Family Name:: **Phelps** Name Suffix:: Мг.

Southhampton City of Residence::

State or Province of Residence::

Country of Residence:: United Kingdom

103 Malmesbury Road, Shirley Street of mailing address::

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Country of mailing address:: United Kingdom

Postal or Zip Code of mailing address:: SO15 5FP

Applicant Authority Type:: Inventor

Primary Citizenship Country::

Status:: **Full Capacity** 

Given Name::

Middle Name::

Name Suffix::

City of Residence::

State or Province of Residence::

Country of Residence::

Street of mailing address::

City of mailing address::

Family Name::

State or	<b>Province</b>	of mailing	address::
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Country of mailing address::

Postal or Zip Code of mailing address::

Applicant Authority Type::

Inventor

Primary Citizenship Country::

Status::

**Full Capacity** 

Given Name::

Middle Name::

Family Name::

Name Suffix::

City of Residence::

State or Province of Residence::

Country of Residence:;

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::

# Correspondence Information

Correspondence Customer Number::

22907

## Representative Information

Representative Customer Number::

22907

# **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
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# Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::
GB	9913848.9	06/14/99	YES
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# **Assignee Information**

Assignee name::

**Nokia Corporation** 

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City of mailing address::

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